

# **COMMUNITIES SELECT COMMITTEE**

## **MINUTES OF THE MEETING HELD ON TUESDAY, 8 NOVEMBER 2016**

**Forum members Present:** Carol Jackson-Doerge, Marigold Jaques and Richard Somner (Chairman)

**Also Present:** Mary-Anne Cosgrove (Service Manager), Tandra Forster (Head of Adult Social Care) and Rachael Wardell (Corporate Director - Communities), Charlene Hurd (Democratic Services Officer) and David Lowe (Scrutiny & Partnerships Manager)

**Forum members Absent:** Councillor Keith Chopping and Councillor Mollie Lock

### **PART I**

#### **4 Declarations of Interest**

Councillor Richard Somner declared an interest in Agenda Item 6, but reported that, as his interest was a personal or a other registrable interest, but not a disclosable pecuniary interest, he determined to remain to take part in the discussion.

#### **5 Communities Select Committee Work Programme**

The Commission considered the items for discussion and concluded that they would form the Communities Select Committee Work Programme.

**Resolved that:**

- (1) Integrated Health and Social Care would be added to the Work Programme.
- (2) Looked After Children placement sufficiency and stability would be added to the Work Programme

#### **6 Items Called-in following the Executive on 20th October 2016.**

There were no items Called-In.

#### **7 Councillor Call for Action**

There were no Councillor Call for Action received.

#### **8 Health and Social Care integration**

Tandra Forster introduced the report to the Committee and provided Members with a presentation to explain the Health and Social Care Integration plans underway.

Members heard that the Health and Social Care Act 2012 set the scene regarding the need for better integrated health and care services. It detailed the need of Local Authorities to join up local services and this was reinforced further in the Care Act 2014; the Care Act also expanded the role to include matters such as housing.

The purpose of integrating services was to meet the need of an aging demographic (nationally). It was recognised that people were living longer but not necessarily healthier lives. However, West Berkshire statistics suggested that the population was typically healthier than the national average.

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The Committee received an illustration of the Council Budget versus the spend on the increasing number of people who required support. Tandra Forster stated that, based on this projection, by 2022-2023 the Council's spend would only be able to pay for social services and no others.

The Committee heard that it was difficult to recruit younger workers to a profession which was physically tiring and offered limited pay. Care work was typically staffed by older people which also brought challenges regarding their own welfare and physical health.

Tandra Forster advised the Committee that the services were often tending to a small number of people but that they had significant needs which required a lot of resources. There were currently 1576 people receiving care out of a local population of 150,000 (approx).

Tandra Forster explained that Pioneer Bidding provided an opportunity to request funds to support and assist local systems of 'early implementers'. The Berkshire West joint health and social care groups agree funding and oversaw the development, testing and implementation of innovative approaches to integration. The ten organisations consisted of: South Reading CCG; North & West Reading CCG; Wokingham CCG; Newbury & District CCG; Royal Berkshire NHS Foundation Trust; Berkshire Healthcare Foundation Trust; Reading Borough Council; Wokingham Borough Council; West Berkshire Council and South Central Ambulance Service. The main priorities identified by the group were:

- Frail Elderly
- Mental Health
- Children

Tandra Forster advised that it was not clear why they had failed to secure funding through the Pioneer Bidding system but they considered that the activity was useful as it created the information required for the Better Care Fund. Members heard that the Berkshire West 10 covered an area with a complex organisational structure in terms of health and social care groups. Some groups covered multiple areas outside of Berkshire West and this added to the complexity around who provided services. In response to questions asked by the Group, Tandra Forster advised that reports were produced to identify the learning from schemes funded by the Pioneer Bids.

The Better Care Fund was a national initiative aimed to accelerate integration. The Berkshire West budget was £10,669m, generated by a contribution from the local Clinical Commissioning Groups. Funding was provided on the basis that schemes met the key national conditions – protecting social care services, 7 day services, reducing non-elective admissions and reducing delayed transfers of care. It was stated that the Better Care Fund was seen as a way to fund social care services and to help manage demand.

Social Workers were now in place at hospitals 7 days a week but it continued to be a challenge to move the health structure to a 7 day week. The process was moving in the right direction but still had more work to undertake. Furthermore, it was evident that health partners were struggling to recruit in key areas and this exacerbated the situation.

The Commission discussed the ongoing challenges faced by the health and social care services in terms of demand and complexity of needs. Rachael Wardell acknowledged that there would always be a high level of demand for services as life expectancy increased (although people did not necessarily live healthier) and advised that it was important to analyse trends to consider whether social care arrangements were sufficient.

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In response to questions asked by the Committee, Tandra Forster advised that she had sufficient support in place to help in the process of presenting businesses cases to secure funding and she was comfortable that there was an escalation route in place - if necessary.

Tandra Forster explained that the NHS 5 year plan focused on 8 key areas and provided the blue print for the service going forward.

Councillor Carol Jackson–Doerge suggested that it would be useful if the Committee could see more detailed information regarding the demographic of people receiving social care services from West Berkshire Council. Tandra Forster agreed that the information would be provided and that this would be shared with the Committee.

The Committee discussed the ongoing challenges faced with recruitment in the care work sector. Rachael Wardell stated that West Berkshire was slightly below the national average in terms of the percentage of people working in social care services. Locally, employment was most common within ICT or telecommunications companies which offered different working conditions and better pay. Therefore, attracting people to work within the care sector was difficult. Members noted that the situation was exacerbated by the issues associated with access to housing. Councillor Jackson- Doerge asked whether the Council had considered reserving affordable housing for key workers. David Lowe stated that the current housing policy had been shaped by Members and that the policy would need to be amended if Members wanted to address the need for key worker housing.

Councillor Marigold Jacques asked whether Newbury College had been asked to consider avenues into care work. Rachael Wardell stated that there were examples of successful 'value based recruitment' and the Council was also looking at apprenticeship routes into social care.

David Lowe stated that it was clear that there were many good ideas being generated in an attempt to improve the integration of services but that, due to the limited amount of funding available, progress was restricted. It was suggested that the Committee could invite the Chairman of the Berkshire West 10 to receive an overview of the funding process and consider West Berkshire's access to funding.

In conjunction with this, it would be considered useful if the Committee consider the Better Care Fund Plan (in anticipation that West Berkshire would receive a further 2 year's funding). The plan would be signed off at the end of the 2016/17 financial year.

Members agreed that more scrutiny should be carried out on this subject.

### **Resolved that:**

1. Tandra Forster would provide statistics regarding the demographic of people receiving social care services from West Berkshire Council.
2. Strategic Support to scope further work on health/social care integration, including examination of the Better Care Fund's operation.

## **9 Looked after children placement sufficiency and stability**

Mary-Anne Cosgrove introduced her report to Members and advised that she managed the Children in Care Team, Family Placement Team and Leaving Care Team. She also

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worked closely with front facing teams within the service to consider processes which could lead to children being placed in care. Members heard that the report detailed the local need and plans in place to meet those needs. However, she stressed that it was not always possible to predict the demand on services so demand was forecasted based on the information the services had available to them.

The Committee was directed to Appendix A (Placement Sufficiency and Stability Report) which was due for final sign off in December 2016. Members heard that West Berkshire District Council served a population of 155,500 people. Of these almost 40,000 were children aged between 0 and 19 years.

The national Census indicated that the majority of the population living in West Berkshire was White British (91.2%). The next largest ethnic group was Other White, such as White European. There was a lower proportion of people from all ethnic minority groups living in West Berkshire than there were nationally and in the South East Region.

Of West Berkshire residents, as a whole, 5% defined themselves as coming from a black or minority ethnic (BME) background compared to 14% of people in England.

Mary-Anne Cosgrove stated that it is a District of contrasts, being one of the most affluent areas in the country yet with some communities experiencing high levels of deprivation.

In terms of Looked After Children, Members were informed that the number had decreased in the last year from 175 children to 155. The largest group of children was aged between 10 and 15 years old. Mary-Anne Cosgrove advised that this age range tended to include children with detachment issues and complex behavioural challenges.

In the last 12 to 18 months there had been a focus on ensuring children did not drift in care. All children accommodated under section 20 had their cases reviewed and for many the Local Authority made the decision to issue care proceedings to secure the children's futures. Mary-Anne Cosgrove stated that there were concerns that the use of Section 20 to accommodate children had been misused by Local Authorities. However, the review ensured that the children's needs were prioritised correctly. Members heard that the degree of parental responsibility held by the local authority was determined by the child's legal status.

The Committee was advised that, wherever appropriate, the service would look to secure adoptive parents because this provided stable and permanent family surroundings. However, on occasions some children may be assessed as not being able to be adopted (perhaps due to age or individual needs). In these cases the team would look at permanency planning which offered benefits such as contact with siblings and parental responsibility.

West Berkshire was considered to have a healthy number of foster carers in place, although the demand for foster placements continue to be met by in-house carers and independent providers. Mary-Anne Cosgrove explained that, in some cases, the foster parents might be assessed as appropriate adoptive parents and in these cases the team would provide emotional support to help them through the process.

David Lowe stated at this point that the report failed to mention budgets in any form. It was suggested that this would be useful information which would help the Committee understand service pressures in an attempt to reach 'Good' according to Ofsted. Rachael Wardell advised that last year had been a difficult period for the service in terms of

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placement costs. Previously the costs had been offset by other areas within the directorate but had been reviewed and budgets altered in order to better reflect anticipated spend. Also, the service introduced a Risk Fund in order that unexpected increases in demand could be managed. Rachael Wardell stated that she was highly confident that the budget was better set going forward. Furthermore, the service was seeing a decrease in the number of Looked After Children due to the great work of preventative and support systems in place. Mary-Anne Cosgrove advised Members that the team reviewed their budgets on a bi-weekly basis and these were also subjected to regular scrutiny.

In response to questions asked about the decreased number of Looked After Children, Rachael Wardell explained that the service was pleased to see numbers reduce but only when it was safe to do so. She did not allow bad practice in order to meet corporate targets – safeguarding children was paramount.

Members heard that the service continued to support young adults leaving care and the challenges these young adults faced in terms of access to ongoing support and advice.

In response to questions asked Mary-Anne Cosgrove advised that the Strategy was supported by a number of programme boards and project plans of which they had agreed timescales and deadlines for tasks. Members were advised that a Project Delivery Plan would be shared with the Committee. Councillor Carol Jackson- Doerge stated that it would be useful to also understand the external influences which could affect the progress of tasks.

Councillor Richard Somner stated that the Committee would benefit from seeing the external factors and risks associated with the delivery plan and this would help determine where Scrutiny was best placed to assist.

### **Resolved that:**

1. Members would receive a Project Delivery Plan which supported the overarching Strategy.

*(The meeting commenced at Time Not Specified and closed at Time Not Specified)*

**CHAIRMAN** .....

**Date of Signature** .....